

PROPOSED RULE MAKING

CR-102 (June 2004) (Implements RCW 34.05.320)

1889	Do NOT use for expedited rule making	
Agency: Administrative Order #07-03 – Health Care Authority – P	rescription Drug Program	
☑ Preproposal Statement of Inquiry was filed as WSR 07-10-069	; or Soriginal Notice	
Expedited Rule MakingProposed notice was filed as WSR		
Proposal is exempt under RCW 34.05.310(4).	Continuance of WSR	
Title of rule and other identifying information: (Describe Subject)		
WAC 182-50-005 Definitions.		
WAC 182-50-200 Endorsing practitioner therapeutic interchange program; effect of practitioner's endorsing status;		
dispense as written instructions.		
Hearing location(s):	Submit written comments to:	
Health Care Authority	Name: Duane Thurman	
676 Woodland Square Loop SE	Address: Health Care Authority	
Olympia, WA 98504	MS: TB-51, 1511 Third Ave., Suite 202	
	Seattle, WA 98101	
The Sue Crystal Center	e-mail duane.thurman@hca.wa.gov	
	fax (206)521-2001 by (date) 5:00 pm September 11,	
D C	2007	
Date: <u>September 11, 2007</u> Time: <u>9:00 am</u>	Assistance for persons with disabilities: Contact	
D	Nikki Johnson by August 28, 2007	
Date of intended adoption: September 12, 2007 (Note: This is NOT the effective date)	TTY (888) <u>923-5622</u> or (360) <u>923-2805</u>	
Purpose of the proposal and its anticipated effects, including ar	ny changes in existing rules:	
refill of a immunomodulator/antiviral treatment for hepartherapy is prescribed for at least twenty-four weeks but nexemption from preferred drug substitution as required be Reasons supporting proposal: To incorporate amendments Laws of 2006).	no more than forty-eight weeks" as a basis for by RCW 69.41.180.	
Statutory authority for adoption: RCW 41.05.160	Statute being implemented: RCW 69.41.180	
Is rule necessary because of a:	CODE REVISER USE ONLY	
Federal Law? Federal Court Decision? Yes No	OFFICE OF THE CODE REVISER	
State Court Decision?	STATE OF WASHINGTON	
If yes, CITATION:	FILED	
	DATE: 1:::::0.26.2007	
DATE June 26 th , 2007	DATE: June 26, 2007 TIME: 4:32 PM	
NAME (type or print)	1	
Jason Siems	WSR 07-14-037	
TITLE		
Rules Coordinator		

Agency comments or recommendations, if any, as to statutory language, implementation, enforcement, and fiscal matters:		
		_
Name of proponent: (person or organization)	Duane Thurman	☐ Private ☐ Public
		Governmental
Name of agency personnel responsible for: Name	Office Location	Phone
		(206) 521-2036
Drafting Duane Thurman ImplementationDuane Thurman	Same as above	()
Enforcement Duane Thurman	Same as above	()
	tement been prepared under chapter 19.85 RCW?	()
☐ Yes. Attach copy of small business economic impact statement.		
A copy of the statement may be obtained by contacting:		
Name: Address:		
, , , , , , , , , , , , , , , , , , , ,		
phone () fax ()		
e-mail		
☑ No. Explain why no statement was prepared.		
The Joint Administrative Rules Review Committee has not requested the filing of a small business economic impact		
statement, and there will be no costs to small businesses.		
Is a cost-benefit analysis required under R0	CW 34 05 3282	
,		
Yes A preliminary cost-benefit analys Name:	is may be obtained by contacting:	
Address:		
phone ()_		
phone () fax () e-mail		
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No: Please explain: RCW 34.05.328 does not apply to the Health Care Authority rules unless requested by the Joint Administrative Rules Committee or applied voluntarily.		
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